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## FEC FORM 2

## STATEMENT OF CANDIDACY

| 1. | (a) Name of Candidate (in full)   |                            |                 |          |   |  |  |
|----|---|----------------------------|-----------------|----------|---|--|--|
|    | Timothy J Walz  |                            |                 |          |   | _  |  |
|    | (b) Address (number and street)<br>P.O. Box 938   | ☐ Check if address changed |                 |          |   | Candidate's FEC Identification Number     H6MN01174        |  |
|    | (c) City, State, and ZIP Code   |                            |                 |          |   | 3. Is This New Amended                                     |  |
|    | Mankato   | MN 56002                   |                 |          | Statement (N) OR (A)                      |  |  |
| 4. | Party Affiliation   | 5. Office Sought           |                 | 1        | <ol><li>State &amp; Dist<br/>MN</li></ol> | rict of Candidate 01                                       |  |
|    | DEMOCRATIC PARTY  | House                      |                 |          | IVIIN                                     | 01   |  |
|    | DE  | SIGNATION O                | F PRINCI        | PAL (    | CAMPAIGI                                  | N COMMITTEE  |  |
| 7. | I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election) |                            |                 |          |   |  |  |
|    | NOTE: This designation should be filed with the appropriate office listed in the instructions.                                |                            |                 |          |   |  |  |
|    | (a) Name of Committee (in full)   |                            |                 |          |   |  |  |
|    | Tim Walz for US Co  | ngress                     |                 |          |   |  |  |
|    | (b) Address (number and street)<br>P.O. Box 938   |                            |                 |          |   |  |  |
|    | (c) City, State, and ZIP Code   |                            |                 |          |   |  |  |
|    | Mankato   |                            |                 |          | MN  | 56002  |  |
| 8. | I hereby authorize the following name candidacy.  NOTE: This designation should be f  | ned committee, which       | is NOT my p     | rincipal |   | res)  mmittee, to receive and expend funds on behalf of my |  |
|    |   |                            |                 |          |   |  |  |
|    | (a) Name of Committee (in full)  Minnesota Victory  |                            |                 |          |   |  |  |
|    | (b) Address (number and street)<br>110 E Liberty Street   |                            |                 |          |   |  |  |
|    | (c) City, State, and ZIP Code   |                            |                 |          |   |  |  |
|    | Mankato   |                            |                 |          | MN  | 56001  |  |
|    |   |                            |                 |          |   | 30001  |  |
|    | I certify that I have exa   | mined this Statemen        | t and to the be | est of m | ny knowledge a                            | and belief it is true, correct and complete.               |  |
| Si | I certify that I have exa   | mined this Statemen        | t and to the be | est of m | y knowledge a                             |  |  |
|    | •   | mined this Statemen        |                 |          | ny knowledge a                            | and belief it is true, correct and complete.  Date         |  |
| Ti | gnature of Candidate mothy Walz   |                            |                 | [Electro | onically Filed]                           | and belief it is true, correct and complete.  Date         |  |
| Ti | gnature of Candidate mothy Walz   |                            |                 | [Electro | onically Filed]                           | Date 05/20/2016  |  |

FEC FORM 2 (REV. 02/2009)